

FORM D



UNITED STATES 9 SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES .PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00

SEC USE ONLY						
Prefix	Serial					
DATE RE	CEIVED					
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, Oth Old Emilian Of Skill English	
Name of Offering (
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: Mew Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) SizeWise Rentals, L.L.C.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1600 Genessee, Suite 950, Kansas City, MO 64102	800-537-6454
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	1 1AN 9 5 2007
The manufacture, distribution, and rental of medical equipment and supplies for the medical	JAN 2 3 2007
Thurings trust Thimited authorship to be formed	olease specify):
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: 96 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	· · · · · · · · · · · · · · · · · · ·
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 ct seq. or 1 JAN 2 9 20
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	. A notice is deemed filed with the U.S. Sed TARMSOIA elow or, if received at that address after the EARLANCIA
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repothereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee,	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	· · · · · · · · · · · · · · · · · · ·
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate lederal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

			A. BASIC/ID	ENTIFICATION DATA			
2.	Enter the information r	equested for the fo	ollowing:				
	Each promoter of	the issuer, if the is	suer has been organized v	vithin the past five years:			
	Each beneficial ov	vner having the pov	ver to vote or dispose, or di	irect the vote or disposition	of, 10% or more o	of a class of equity securities of the	issuer.
	• Each executive of	ficer and director of	of corporate issuers and of	corporate general and ma	naging partners o	f partnership issuers; and	
	Each general and	managing partner of	of partnership issuers.				
<u></u>	L Description				FT 01		
Chec	k Box(es) that Apply:	Promoter	✓ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
	Name (Last name first,	if individual)					
Fric	key, Jacqueline R.						
	ness or Residence Addre Main, Box 289, Spe		Street, City, State, Zip C kota 57783	ode)			
Chec	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full :	Name (Last name first,	if individual)		<u> </u>			
Fric	key, Willard L.						
Busi	ness or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)			
	Main, Box 289, Spea			•			
Chec	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
	Name (Last name first, i Jacqueline R. Fricke	•	ned Unitrust dated Feb	oruary 22, 2000			
Busir	ness or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)			
c/o F	Rod Taylor, Trustee, I	Dechant S. Taylo	or, P.O. Box 280, LaC	rosse, Kansas 67548			
Chec	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full 1	Name (Last name first, i	f individual)			· · · · · · · · · · · · · · · · · · ·		
The '	Willard L. Frickey Gra	antor Retained U	Unitrust dated February	y 22, 2002		•	
		•	Street, City, State, Zip Co lor, P.O. Box 280, LaC				
Checl	k Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full h	Name (Last name first, i	f individual)	· · · · · · · · · · · · · · · · · · ·	, <u>, , _</u>			
Busin	ess or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	· ·		
Checi	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full N	lame (Last name first; i	(individual)					
Busin	ess or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or — Managing Partner	
ull N	lame (Last name first, i	findividual)	· · · · · · · · · · · · · · · · · · ·				•
Busin	ess or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)			
		(Use blat	nk sheet, or copy and use :	additional copies of this s	licet, as necessary)	

20		1 SE	-	TOTAL	B. I	NIORMAT	ION ABOU	II ÓEFER	ING				Si de la companya de
ı	Has the	iccuer col	d, or does t	ha issuae i	ntand to ca	ll to non-	acaraditad	inuspiare l	n this offar	in oʻʻ		Yes	No
••	1705 1110	. 133001 301	u. or does t		swer also in					-	,	- 🖸 .	M
2.	What is	s the minin	num investr			• •		_				\$ N/A	See p. 9
	ъ	CC .										Yes	No
3.			permit join									_	(
4	commis If a pers or state	ssion or sim son to be lis s, list the n	tion reques silar remune sted is an ass ame of the b , you may s	ration for s sociated pe roker or d	solicitation erson or age ealer. If me	of purchas ont of a bro ore than fiv	ers in conn ker or deald e (5) perso	ection with or registere ns to be lis	sales of se d with the S ted are asso	curities in SEC and/or	the offering with a stat	;: e	
Ful N//		Last name	first, if ind	ividual)									
		Residence	Address (N	umber and	d Street, C	ity, State, 2	Zip Code)	<u> </u>			· · · · · · · · · · · · · · · · · · ·		
Nar	me of As	sociated Br	oker or De	aler			•						
Star	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				 		
	(Check	"All States	s" or check	individual	States)				······		·····	□ Al	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Full	l Name (I	Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)	· ····/			<u> </u>		· · · · · · · · · · · · · · · · · · ·
Nan	ne of Ass	ociated Br	oker or Dea	aler									
Stat			Listed Has								· · · · ·		<u>.</u>
	(Check	"All States	" or check	individual	States)			******************		•••••		☐ AI	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	MI OH WV	GA MN OK W1	MS OR WY	ID MO PA PR
Full	Name (I	Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)				 		
Nan	ie of Ass	ociated Br	oker or Dea	ler	 -		·····			· · · · · · · · · · · · · · · · · · ·			
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check '	'All States	" or check	individual	States)				****************			☐ All	States
	ALI ILI MI RI	AK N NE SC	AŽ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C OFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS

L	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, chec this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.	k	•
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	.s	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	\$	•
	Partnership Interests		\$
	Other (Specify Membership Interests** see p. 9		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	Φ	3
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	• •	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)		\$_0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		-
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		s
	Regulation A		\$
	Rule 504		s
	Total		\$ _0.00
\$	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s_0.00
	Printing and Engraving Costs		\$ 0.00
	Legal Fees		\$ 80,000.00
	Accounting Fees		\$ 0.00
	Engineering Fees	-	\$ 0.00
	Sales Commissions (specify finders' fees separately)	_	\$ 0.00
	Other Expenses (identify)	-	\$ 0.00
	Total		\$ 80,000.00
	4 - 7		

'n.	STORY OF FERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	•	3,505,039.23
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		
	Purchase of real estate] \$	s
	Purchase, rental or leasing and installation of machinery and equipment	7.\$	ПS
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		_
	issuer pursuant to a merger)		
	Repayment of indebtedness		
	Working capital	_	-
	Other (specify):] \$	
		}\$	
	Column Totals] \$ <u>0.00</u>	\$ 3,505,039.23
	Total Payments Listed (column totals added)		505,039,23
Ä	DiffeDERAL SIGNATURE 2- 12 in the control of the co		
ign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice lature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Reference of the control of	is filed under Ru ion, upon writter	le 505, the following
		ate /15/2007	
1411	I caul tuden Exercitor finan	14.	
	1 My Hudso Executor Type) Title of Signer (Print or Type) Little of Signer (Print or Type)	I WY	a
		ω	
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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E STATE SIGNATURE		
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No D

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
SizeWise Rentals, L.L.C.	Trun Lhas	1/15/2007
Name (Print or Type)) ruly Hudso	Title (Print or Type)	Hour
		(11)

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				A.	PPENDIX		2		
1		2	3			4		Disqual	ification
	to non-a	d to sell accredited is in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				(if yes, explana waiver	ite ULOE attach ition of granted) Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
ΑZ									
AR									
CA		×	Membership Int.	2	\$616,370.20	0	\$0.00		×
СО									
СТ						,			
DE									
DC									
FL									
GA									
HI									
ID									
IL			,						
IN									
IA									
KS		×	Membership Int.	4	\$1,167,378	0	\$0.00		×
KY									
LA	··								<u>i</u>
ME									
MD									
MA									
Mi		×	Membership Int.	1	\$424,989.7	0	\$0.00		×
MN								<u> </u>	<u> </u>
MS						1			

				PAPP	ENDIX :				
	Intend to non-a investor	2 to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	·	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо		×	Membership Int.	1	\$269,395.0	0	\$0.00		×
МТ									
NE									
NV									
NH									
NJ									
NM						•			
NY							_		
NC			• ,						
ND									
ОН									
ок									
OR		l							
РА									
RI		1					i		
SC									
SD		×	Membership Int.	2	\$1,108,885.	0	\$0.00		×
TN			-						
ТХ									
UT					,				
VT								, ;	
VA									
WA									
wv		1		•					
wı									

l	to non-a	to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				Disqualification Under State UL (if yes, attach explanation o waiver grante (Part E-Itein 1	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

^{*} This sale is being made through contributions of 100% of certain non-public entities in exchange for ownership interests in SizeWise Rentals, L.L.C.; therefore, no actual money will be accepted by SizeWise Rentals, L.L.C. in this transaction.

^{**} This sale involves the contribution of ownership interests of certain non-public entities in exchange for membership interests in SizeWise Rentals, L.L.C.; therefore, the "Aggregate Offering Price" denoted in C.1 above equals the aggregate value of the contributed entities at the time of contribution. Furthermore, the dollar values attributable to the residents of each state as denoted within the Appendix are likewise representative of the value of the individual contributions made in order to acquire membership interests in SizeWise Rentals, L.L.C.